PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

1	STRUCTIONS:	This	form should	be used for	or transmitting	the ISSUE	FEE and	PUBLICATIO	N FEE (if r	equired).	Blocks 1	through 5 s	hould be	completed v	where
app	ropriate. All fu	rther o	correspondenc	e includin	g the Patent, a	dvance orde	ers and noti	fication of mai	intenance fe	es will be	mailed to	the current	correspon	ndence addre	ess as
	icated unless co			rected other	erwise in Bloc	k 1, by (a)	specifying a	a new correspo	indence addr	ress; and/o	or (b) indi	cating a sepa	rate "FE	E ADDRESS	" for
ma	intenance fee no	tificat	ions.												

CURRENT CORRESPONDE	NCE ADDRESS (Note: Use Block I for	or any change of address	s)		Note: A	certificate	of mail	ling can only be used	for domesti	c mailings of the				
			OIPE		papers.	Each additio	nal par	rtificate cannot be use per, such as an assigni	nent or form	er accompanying all drawing, mu				
_	7590 01/25/2005				nave its			nailing or transmission						
NOVARTIS		EDTY		3	I hereby	C certify that	ertification for this feature in the second	ate of Mailing or Tra e(s) Transmittal is be	nsmission	l with the Unite				
ONE HEALTH P	ITELLECTUAL PROP	ERII B API	1 9 200E	8	States P	ostal Service	with s	sufficient postage for to p ISSUE FEE address	irst class ma	il in an envelo				
	R, NJ 07936-1080	API	1 9 2005	e e	transmit	ted to the US	PTO (	703) 746-4000, on the	date indicat	ed below.				
	.,	E.		E.						(Depositor's name				
		₹\Z	ADDIA CALL		SEE	PTI.TNG	. RY	EXPRESS MA	II. BELO	W (Signature				
		•	CAT SAME					HAT KIJOD THY.	LI DIE	(Date				
APPLICATION NO.	PPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATT	TORNEY DOCKET NO.	CONFIR	MATION NO.				
10/620,625	07/16/2003	•	Steven D					4-32591A		9679				
TITLE OF INVENTION: 1	N-ALKYĽÁTIÓN OF INDO	LE DERIVATIV	ES		)]	04/21	/2005	BABRAHA2 000000	1 190134	10620625				
		. ,								1000000				
		;	•		j	01 FC: 02 FC:		1400.00 DA 300.00 DA						
APPLN. TYPE	PPLN. TYPE SMALL ENTITY		ISSUE FEE		PUBLICATION FEE FC					TE DUE				
nonprovisional				\$300			<u> </u>	\$1700	04/	25/2005				
EXAM	EXAMINER			CLASS-SUBCLASS			7							
SAEED, I	SAEED, KAMAL A			26 548-502000			J							
1. Change of correspondence	e address or indication of "Fe	e Address" (37	2. For prin	ting on th	ne patent	front page, l	ist		<del></del>					
CFR 1.363).	CFR 1.363).					(1) the names of up to 3 registered patent attorneys 1 John W. Kung								
Change of correspond Address form PTO/SB/1	Correspondence	or agents OR, alternatively,  (2) the name of a single firm (having as a member a 2												
"Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.	tion form of a Customer	registered attorney or agent) and the names of up to												
3. ASSIGNEE NAME AND	RESIDENCE DATA TO BI	E PRINTED ON T	THE PATENT	(print or	type)									
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appe T a substitute i	ar on the	patent.	If an assign	ee is i	identified below, the	document ha	s been filed for				
(A) NAME OF ASSIGN	EE	(B	) RESIDENC	E: (CITY	and STA	ATE OR CO	UNTR	Y)						
Nov	artis AG					Bas	e1,	Switzerland	l					
Please check the appropriate	assignee category or categor	es (will not be pri	inted on the pa	tent):	☐ Indiv	ridual 🚨 Co	orporat	tion or other private gr	oup entity	Government				
4a. The following fee(s) are	enclosed:	4b.	. Payment of F	ee(s):		,2"								
Issue Fee			A check in	the amo	unt of the	e fee(s) is en	closed.	•						
Publication Fee (No sr	Payment by credit card. Form PTO-2038 is attached.													
Advance Order - # of	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0134 (enclose an extra copy of this form).													
5. Change in Entity Status (	(from status indicated above)		***************************************					-((						
a. Applicant claims SM	MALL ENTITY status. See 37	CFR 1.27.	b. Applica	nt is no le	onger cla	iming SMAI	L EN	FITY status. See 37 C	FR 1.27(g)(2	2).				
NOTE: The Issue Fee and Pu	s requested to apply the Issue blication Fee (if required) wirds of the United States Paten	l not be accepted	from anyone	) or to reother than	apply and the appl	ny previously licant; a regi	paid i	issue fee to the applica attorney or agent; or the	ition identific ne assignee o	ed above. or other party in				
		/						<i>-1</i>	_					

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandra Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Respectively, Figure 2313-1450.

Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

abel Number brough 04/30/2007.

John W. Kung

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

2005 Date of Deposit

Authorized Signature

Typed or printed name